

TRANSMITTAL FORM

Application Number: 10/801,982
 Filing Date: March 16, 2004
 First Named Inventor: Marianna Goldrick
 Art Unit: 1653
 Examiner Name: Unknown
 Attorney Docket Number: AMBI:094US

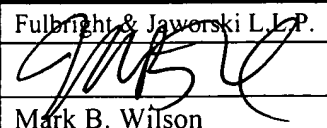
Total Number of Pages in this Submission :

ENCLOSURES (check all that apply)

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| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
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<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input checked="" type="checkbox"/> Information Disclosure Statement
<input checked="" type="checkbox"/> Form PTO-1449
<input checked="" type="checkbox"/> References B1-B2 & C34
<input type="checkbox"/> Certified Copy of Priority Documents
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application
<input type="checkbox"/> Reply to Missing Parts/Requirements
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<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
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<input type="checkbox"/> Statement under 37 CFR §3.73(b)
<input type="checkbox"/> Designation of Patent Practitioners
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number CD(s) _____
<input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Check in the amount of \$ _____
<input checked="" type="checkbox"/> Authorized to be charged to deposit account if check insufficient or inadvertently omitted
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<input type="checkbox"/> Sequence Statement
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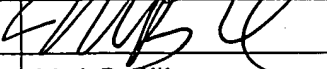
Remarks:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Fulbright & Jaworski L.L.P.	Customer Number	32425
Signature			
Printed Name	Mark B. Wilson	Reg. No.	37,259
Date	February 3, 2006		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: MS AMENDMENT Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or Printed Name	Mark B. Wilson	Date	February 3, 2006



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
Marianna Goldrick

Serial No.: 10/801,982

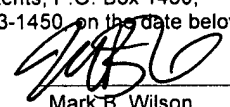
Filed: March 16, 2004

For: PROCESS AND REAGENTS FOR
EXTRACTION OF RNA FROM
FRACTIONATED BLOOD
LEUKOCYTES

Group Art Unit: 1653

Examiner: Unknown

Atty. Dkt. No.: AMBI:094US

CERTIFICATE OF MAILING 37 C.F.R. 1.8	
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SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

MS AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

In compliance with the duty of disclosure under 37 C.F.R. § 1.56, it is respectfully requested that this Supplemental Information Disclosure Statement be entered and the documents listed on attached Form PTO-1449 be considered by the Examiner and made of record. Copies of the listed documents required by 37 C.F.R. § 1.98(a)(2) are enclosed for the convenience of the Examiner.

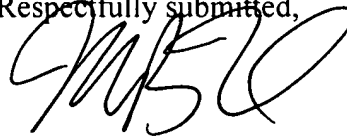
In accordance with 37 C.F.R §§ 1.97(g), (h), this Supplemental Information Disclosure Statement is not to be construed as a representation that a search has been made, and is not to be

construed to be an admission that the information cited is, or is considered to be, material to patentability as defined in 37 C.F.R. § 1.56(b).

The present Supplemental Information Disclosure Statement is being filed prior to the receipt of a first Official Action reflecting an examination on the merits, and hence is believed to be timely filed in accordance with 37 C.F.R. § 1.97(b). No fees are believed to be due in connection with the filing of this Supplemental Information Disclosure Statement, however, should any fees under 37 C.F.R. §§ 1.16 to 1.21 be deemed necessary for any reason relating to these materials, the Commissioner is authorized to deduct the appropriate fees from Fulbright & Jaworski Deposit Account No.: 50-1212/AMBI:094US..

Applicant respectfully requests that the listed documents be made of record in the present case.

Respectfully submitted,



Mark B. Wilson
Reg. No. 37,259
Attorney for Applicant

FULBRIGHT & JAWORSKI L.L.P.
600 Congress Avenue, Suite 2400
Austin, Texas 78701
(512) 474-5201

Date: February 3, 2006

Form PTO-1449 (modified)		Atty. Docket No. AMBI:094US	Serial No. 10/801,982
List of Patents and Publications for Applicant's INFORMATION DISCLOSURE STATEMENT (Use several sheets if necessary)		Applicant Marianna Goldrick	
		Filing Date: March 16, 2004	Group: 1653
U.S. Patent Documents <i>See Page 1</i>	Foreign Patent Documents <i>See Page 1</i>	Other Art <i>See Page 1</i>	

U.S. Patent Documents

Exam. Init.	Ref. Des.	Document Number	Date	Name	Class	Sub Class	Filing Date of App.
	A1	4,925,572	05/15/90	Pall	767	210	10/19/88

Foreign Patent Documents

Exam. Init.	Ref. Des.	Document Number	Date	Country	Class	Sub Class	Translation Yes/No
	B1	WO 01/11362	02/15/01	WIPO			YES
	B2	WO 94/17209	08/04/94	WIPO			YES

Other Art (Including Author, Title, Date Pertinent Pages, Etc.)

Exam. Init.	Ref. Des.	Citation
	C34	Hämäläinen <i>et al.</i> , "Major interference from leukocytes in reverse transcription-PCR identified as neurotoxin ribonuclease from eosinophils: detection of residual chronic myelogenous leukemia from cell lysates by use of an eosinophil-depleted cell preparation", <i>Clinical Chemistry</i> , 45: 465-471, 1999.

25617987.1

EXAMINER:

DATE CONSIDERED:

EXAMINER: INITIAL IF REFERENCE CONSIDERED, WHETHER OR NOT CITATION IS IN CONFORMANCE WITH MPEP609; DRAW LINE THROUGH CITATION IF NOT IN CONFORMANCE AND NOT CONSIDERED. INCLUDE COPY OF THIS FORM WITH NEXT COMMUNICATION TO APPLICANT.